FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL					
OMB Number:	3235-0076				
Expires:	April 30, 2008				
Estimated Average burden					
hours per response	16.00				



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

	SEC US	E ONLY			
Prefix		Serial			
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	DATE RE	CEIVED			
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series A Preferred Stock	තිපම Mail Processing
Filing Under (Check box(es) that apply):	AHC (1200a
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	Washington, 86
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Media6Degrees Inc.	101
Address of Executive Offices (Number and Street, City, State, Zip Code) 206 East 63rd Street, Fifth Floor, New York, New York 10065 Telephone Number and Street, City, State, Zip Code) (646) 278 4919	er (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Numb (if different from Executive Offices)	er (Including Area Code)
Brief Description of Business Online advertising and technology company	PROCESSED
Type of Business Organization	AUG 2 0 2008
☐ Corporation	AUG 2 0 2008 THOMSON REUTER
Month Year Actual or Estimated Date of Incorporation or Organization: 01 2008 ☑ Actual ☐ Estimated	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction	DE

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC IDE	ENTIFICATION DATA		
 Each beneficial owner 	issuer, if the issuer I having the power to r and director of cor	has been organized within the o vote or dispose, or direct th porate issuers and of corpora	e vote or disposition of, 10%		f equity securities of the issuer.
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if	f individual)				
Doran, Joseph P.					
Business or Residence Addre	ss (Number and S	treet, City, State, Zip Code)			
c/o Media6Degrees Inc.,	206 East 63rd St	reet, Fifth Floor, New Y	ork, NY 10065	· 	
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Hook, Rod					
Business or Residence Addre	ss (Number and S	treet, City, State, Zip Code)			
c/o Media6Degrees Inc.,	206 East 63rd St	reet, Fifth Floor, New Y	ork, NY 10065	····	·· · ··
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
U.S. Venture Partners 13	K, L.P.	<u></u>			
Business or Residence Addre	ss (Number and S	treet, City, State, Zip Code)			
2735 Sand Hill Road, Mo	enlo Park CA 94		<u> </u>		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Connors, Tim					
Business or Residence Addre	ss (Number and S	treet, City, State, Zip Code)			
c/o U.S. Venture Partner	s IX, L.P., 2735		Park CA 94025		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Maidenberg, Ted					
Business or Residence Addre					
c/o U.S. Venture Partner					
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i	•				
Contour Venture Partne					
Business or Residence Addre	`				
153 East 53rd Street, 360				⊠ ₽::	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Greene, Robert					
Business or Residence Addre	ss (Number and S	treet, City, State, Zip Code)			
c/o Contour Venture Par	tners LLC, 153	East 53rd Street, 36th F	loor, New York, NY 100	22	
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, it	f individual)			_	
Coriolis Ventures, LLC					
Business or Residence Addre	•				
c/o Rayner Rowe LLP, 3	05 Broadway, 14	Ith Floor, New York, NY	10007		
	/** •				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Murray, Alan				 	
Business or Residence Addre	ss (Number and S	treet, City, State, Zip Code)			
c/o Rayner Rowe LLP, 3	05 Broadway, 14	th Floor, New York, NY	10007		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director □ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Abram, Joshua					
Business or Residence Addre	ss (Number and S	treet, City, State, Zip Code)			
c/o Rayner Rowe LLP, 3	05 Broadway, 14	th Floor, New York, NY	10007		

B. INFORMATION ABOUT OFFERING	
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes 🗌 No 🛛
Answer also in Appendix, Column 2, if filing under ULOE.	
2. What is the minimum investment that will be accepted from any individual?	\$N/A
3. Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given directly or indirectly any commission or	Yes 🖾 No 🗋
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is	
an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the	
information for that broker or dealer only. **NO COMMISSIONS TO BE PAID**	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Chaele "All States" or shook individual States)	All States
	ID
	3
IL IN IA KS KY LA ME MD MA MI MN MS	<u>MO</u>
MT NE NV NH NJ NM NY NC ND OH OK OR	PA
RI SC SD TN TX UT VT VA WA WV WI WY	PR
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
	All States
AL AK AZ AR CA CO CT DE DC FL GA H	II ID
IL IN IA KS KY LA ME MD MA MI MN M	S MO
MT NE NV NH NJ NM NY NC ND OH OK O	R PA
RI SC SD TN TX UT VT VA WA WV WI W	Y PR
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	All Casas
	All States
AL AK AZ AR CA CO CT DE DC FL GA HI	_ID
IL IN IA KS KY LA ME MD MA MI MN MS	МО
MT NE NV NH NJ NM NY NC ND OH OK OR	PA
RI SC SD TN TX UT VT VA WA WV WI WY	PR
C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS	
 Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box ☐ and indicate in the columns below the amounts of the securities offered for exchange and 	
already exchanged. Aggregate Offician Price	Amount Already
Type of Security Offering Price	Sold \$

	Equity	s <u>9,348,337.17</u>	-	\$ <u>9,348,337.17</u>
	☐ Common ☑ Preferred			
	Convertible Securities (including warrants)	s	-	s
	Partnership Interests	\$	-	\$
	Other (Specify)	\$	_	\$
	Total			\$ <u>9,348,337.17</u>
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number		Aggregate Dollar Amount
	Accredited Investors	Investors		of Purchases \$9,348,337.17
	Non-accredited Investors			
				\$ <u>0</u>
	Total (for filings under Rule 504 only)		-	S
	swer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505		_	\$
	Regulation A	-	_	\$
	Rule 504		_	\$
	Total		_	\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$
	Legal Fees		\boxtimes	\$75,000.00
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			\$ <u>0</u>
	Other Expenses (identify)			\$
	Total		\boxtimes	\$ <u>75,000.00</u>

7 VA	AND CONTRACTOR OF THE CONTRACT	number of investors expenses and u	SE Q	PPROCEEDS		
	b. Enter the difference between the aggregate offe	ring price given in response to Part C – Question I C – Question 4.a. This difference is the "adjusted		\$ <u>9,273,</u>	337,1	7
5.	each of the purposes shown. If the amount for a	roceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and tal of the payments listed must equal the adjusted Part C – Question 4.b above.				
			o	Payments to fficers, Directors & Affiliates		Payments to Others
	Salaries and fees			s		s
	Purchase of real estate			\$		s
	Purchase, rental or leasing and installation of mach	ninery and equipment		\$		s
	Construction or leasing of plant buildings and facil	lities		\$		s
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset	e of securities involved in this is or securities of another issuer	п	s	п	s
	- :					•
		***************************************			⊠	\$9,273,337.17
	working capital	***************************************	_	<u> </u>	123	
	Other (specify)					
				s		s
				S	\boxtimes	\$9,273,337.17
	Total Payments Listed (column totals added)	***************************************		⋈ \$ <u>9,27</u>	3,3 <u>37</u>	
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		* = #DEPENDER (#STONYOUR)				
con	issuer has duly caused this notice to be signed by stitutes an undertaking by the issuer to furnish to the issuer to any non-accredited investor pursuant to particular to the second se	the undersigned duly authorized person. If this not U.S. Securities and Exchange Commission, upon wr ragraph (b)(2) of Rule 502.	lice is itten i	s filed under Rule 50: request of its staff, the	5, the : infon	following signature nation furnished by
Iss	er (Print of Type)	Signature	Dat	e		
M	dia6Degrees Inc.	Janh X	Au	gust 4, 2008		
	nc of Signer (Print or Type	Title of Signer (Print or Type)				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

<u> </u>		ŽĖ. ST	ATE SIGNATURE		<u> </u>
1.	Is any party described in 17 CFR 230.262 provision of such rule?				لستسا
		See Appendix	, Column 5, for state respon	se.	
2.	The undersigned issuer hereby undertakes CFR 239.500) at-such-times as required b	,	state administrator of any s	tate in which this notice is filed a notice on Form D (17
3	The undersigned issuer-hereby undertake offerees.	s to furnish to the	state-administrators,-upon	written request; information furnished by the issuer	10
4	The undersigned issuer represents that the Offering Exemption (ULOE) of the eta exemption has the burden of establishing	t o in which this	notice is filed and unders	must be satisfied to be entitled to the Uniform limit tands that the issuer claiming the availability of the	ed 1is
	ssuer has read this notification and knows authorized person.	the contents to be	true and has duly caused the	his notice to be signed on its behalf by the undersign	ed
Issue	r (Print of Type)	Signature/	12/2	Date	

President and Chief Executive Officer

August 4, 2008

Instruction:

Media6Degrees Inc.

Joseph P. Doran

Name of Signer (Print or Type

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

